

Title V is located in the Family Health Bureau in the Public Health Division in the New Mexico Department of Health. The Title V Director is also the Bureau Chief of the Family Health Bureau. Family Health Bureau oversees: the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), Family Planning, Children With Special Health Care Needs, Perinatal Case Management/Home visiting, Maternal Health, Child Health, Maternal Child Health (MCH) Epidemiology, and Part C Care Coordination. School Health, Dental Health, Childhood Injury Prevention, and Immunizations are located in other bureaus within the Public Health Division, but close coordination exists. The SECCS component is housed within the Maternal Child Health Section of the Bureau. The Family Health Bureau consists of six sections/programs, and administrative staff who oversee the implementation of preventive services to reproductive aged women, mothers, infants, children, adolescents/youth, including children and youth with special health care needs, and their families, assess the needs of this population, and generate data to influence policy decision making. The services provided range from: 1) Direct safety-net health care services to individuals; 2) Family support services such as transportation, parent to parent support, and case management, or care coordination, WIC, Commodity Supplemental Foods, and Farmer's Market, outreach, translation, and health education; 3) Population-based services, such as newborn screening, surveillance, SIDS education and counseling, and injury and violence prevention activities, a marketing campaign to increase positive birth outcomes; and 4) Capacity or infrastructure building services, such as needs assessment, evaluation, planning, policy development, quality assurance, monitoring, training, information systems, and helping in developing systems of care. Several programs fund positions in the District and Local Health Offices to implement these services. The Bureau houses a Medical Director, Bureau Chief, and support staff work collaboratively as a team to use resources strategically to meet identified needs within this population depending on their program focus.

MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V - MCH National Performance Measures	State 2004 Results	State 2009 Goal
The percent of newborns who are screened and confirmed with condition(s) mandated by their State-sponsored newborn screening programs (e.g. phenylketonuria and hemoglobinopathies) who receive appropriate follow up as defined by their State.	100.0%	100%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	45.4%	50%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	66.5%	72%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	73%	75%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	36.6	34.5
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	7.3	5
Percentage of mothers who breastfeed their infants at hospital discharge.	83%	84%
Percentage of newborns who have been screened for hearing before hospital discharge.	92.0%	96%
The percent of very low birth weight infants among all live births.	1.1%	1%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	65.7%	71%
Title V - MCH National Outcome Measures	State 2004 Results	State 2009 Goal
The infant mortality rate per 1,000 live births.	6.1	6
The ratio of the black infant mortality rate to the white infant mortality rate.	1.2	1.8
The neonatal mortality rate per 1,000 live births.	3.7	3.6
The postneonatal mortality rate per 1,000 live births.	2.5	1.8
The perinatal mortality rate per 1,000 live births plus fetal deaths.	6.5	6
The child death rate per 100,000 children aged 1 through 14.	26.6	26
Title V - Selected MCH State Performance Measures	State 2004 Results	State 2009 Goal
The number of 33 counties adopting the conceptual framework of Healthy Youth/Healthy Communities through an Assets/Resiliency model approach when working with youth.	0.5	*
Percent of first newborns/moms receiving support services/parenting through community home visiting/support programs	9.7	10
Reduce unintended pregnancy in New Mexico to less than 30% of births	41	*

State Population:
1,878,562
Live Births: 27,845

TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group			
Populations Served	Number of Individuals Served	Expenditures FY 2004	
Pregnant Women	15,760	\$1,340,368	12.3%
Infants < 1 year old	27,649	\$491,382	4.5%
Children 1 to 22 years old	28,021	\$4,422,456	40.7%
Children with Special Healthcare Needs	5,765	\$4,487,102	41.3%
Others	24,578	\$0	0%
Administration		\$115,906	1.1%
Totals	101,773	\$10,857,214	100%
By Source of Funds			
<p>1. Federal Allocation 4,770,284 (43.9%)</p> <p>2. State Funds 6,086,930 (55.1%)</p> <p>3. Local MCH Funds 0 (0%)</p> <p>4. Unobligated Balance 0 (0%)</p> <p>5. Program Income 0 (0%)</p> <p>6. Other Funds 0 (0%)</p>			
By Category of Services			
<p>1. Direct Health Care Services \$5,598,254 (51.6%)</p> <p>2. Enabling Services \$3,053,184 (28.2%)</p> <p>3. Population-Based Services \$173,751 (1.6%)</p> <p>4. Infrastructure-Building Services \$2,022,025 (18.6%)</p>			
HOTLINE CALLS			

FAMILY PARTICIPATION IN CSHCN PROGRAM

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate. 3

Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups. 3

Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process. 3

Family members are involved in service training of CSHCN staff and providers. 3

Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member). 2

Family members of diverse cultures are involved in all of the above activities. 2

FY 2004 Total: 16

Total Possible: 18

Scale: 0 = Not Met
1 = Partially Met
2 = Mostly Met
3 = Completely Met

MCH PARTNERSHIP FUNDS FY 2004

Title V Federal-State Block Grant:

10,857,214

Other MCHB Grant Programs:

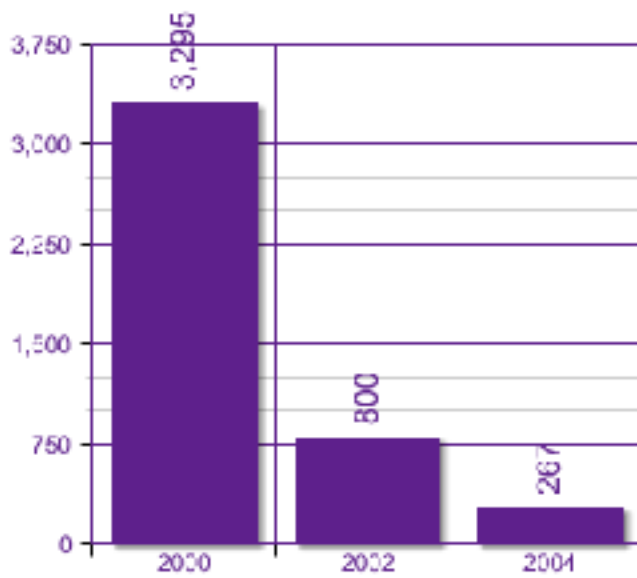
3,798,432

Bioterrorism Grant Program:

3,650,348

Total MCH Partnership Funds:

18,305,994



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CONTACT INFORMATION

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* Data not available